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APPLICATION NUMBER	FILING or 371(c) DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	TOT CLAIMS	IND CLAIMS
10/554,409	04/23/2008	1653	895	1768-139	20	1

CONFIRMATION NO. 4548

6449

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SUITE 800  
WASHINGTON, DC 20005

FILING RECEIPT



Date Mailed: 01/29/2009

Receipt is acknowledged of this non-provisional patent application. The application will be taken up for examination in due course. Applicant will be notified as to the results of the examination. Any correspondence concerning the application must include the following identification information: the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please submit a written request for a Filing Receipt Correction. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections**

**Applicant(s)**

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**Assignment For Published Patent Application**

ImVisioN GmbH, Hannover, GERMANY

**Power of Attorney:** The patent practitioners associated with Customer Number 6449

**Domestic Priority data as claimed by applicant**

This application is a 371 of PCT/IB04/01583 04/22/2004

**Foreign Applications**

UNITED KINGDOM 0309345.7 04/24/2003

**If Required, Foreign Filing License Granted:** 01/23/2009

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US 10/554,409**

**Projected Publication Date:** 05/07/2009

**Non-Publication Request:** No

**Early Publication Request:** No

**\*\* SMALL ENTITY \*\***

**Title**

Recombinant allergen

**Preliminary Class**

435

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